



**PATENT**

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**In the United States Patent and Trademark Office**

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In re application of: Stewart, et al.

Attorney Docket No.: CISC226/4185

Application No.: 10/008,091

Examiner: El Hadji Malick Sall

Filed: November 9, 2001

Group: 2157

Title: METHODS AND APPARATUS FOR  
USING SCTP TO PROVIDE MOBILITY OF A  
NETWORK DEVICE

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11/28/2005 DTESSEM1 00000008 10008091

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**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first-class mail on **November 22, 2005** in an envelope addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

Signed: \_\_\_\_\_

Mary Deauclaire

**AMENDMENT B - AFTER FINAL**

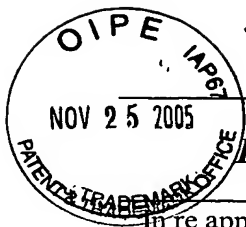
Mail Stop: AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed August 25, 2005, please enter the following remarks:

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks/Arguments** begin on page 18 of this paper.



TFW  
AFB

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I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first-class mail on November 22, 2005 in an envelope addressed to the Commissioner for Patents, Mail Stop Amendment, P.O. Box 1450 Alexandria, VA 22313-1450.

Signed: \_\_\_\_\_

*Mary Deauclaire*  
Mary Deauclaire

AMENDMENT AFTER FINAL TRANSMITTAL

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	52	MINUS	56	0	x 25 =	x 50 = 0
Independent Claims	12	MINUS	08	04	x 100 =	x 200 = \$800
Multiple Dependent Claim Present and Fee Not Previously Paid						na
Total					\$	\$800

- ☐ Applicant(s) hereby petition for a \_\_\_\_\_ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☒ Enclosed is our Check No. 11308 in the amount of \$800.00 to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. CISC226).

Respectfully submitted,  
BEYER WEAVER & THOMAS, LLP

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